

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization COMMUNITY FOUNDATION OF THE OZARKS, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 8960 City or town, state or province, country, and ZIP or foreign postal code SPRINGFIELD, MO 65801 F Name and address of principal officer: SUSANNE GRAY 516 E NORMAL, SPRINGFIELD, MO 65807	D Employer identification number 23-7290968 E Telephone number (417) 864-6199 G Gross receipts \$ 24,528,385. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ CFOZARKS.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1973 M State of legal domicile: MO

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: TO ADMINISTER FUNDS FOR DONORS AND AGENCIES AND PROVIDE GRANTMAKING SERVICES TO NONPROFITS IN		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	21
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	21
	6 Total number of volunteers (estimate if necessary)	6	800
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		21,195,653.	15,503,566.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,571,273.	4,554,084.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		246,141.	341,138.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		26,013,067.	20,398,788.
14 Benefits paid to or for members (Part IX, column (A), line 4)		13,277,600.	14,271,450.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
16a Professional fundraising fees (Part IX, column (A), line 11e)		1,266,814.	1,330,836.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 43,079.		0.	0.
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,289,012.	2,346,452.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,833,426.	17,948,738.
	19 Revenue less expenses. Subtract line 18 from line 12	9,179,641.	2,450,050.
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year
21 Total liabilities (Part X, line 26)		222,283,261.	253,894,803.
22 Net assets or fund balances. Subtract line 21 from line 20		61,123,469.	86,175,369.
		161,159,792.	167,719,434.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer SUSANNE GRAY, ASSISTANT SECRETARY	Date	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name JOSEPH PAGE	Preparer's signature	PTIN P00887441
	Firm's name ▶ WHITLOCK, SELIM & KEEHN, LLP	Firm's EIN ▶ 43-1365401	
	Firm's address ▶ 3271 E. BATTLEFIELD SUITE 300 SPRINGFIELD, MO 65804	Phone no. (417) 881-0145	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission: TO ADMINISTER FUNDS FOR DONORS AND AGENCIES AND PROVIDE GRANTMAKING SERVICES TO NONPROFITS IN SOUTHERN MISSOURI

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 14,271,450. including grants of \$ 14,271,450.) (Revenue \$) THE FOUNDATION RECEIVES, DISTRIBUTES AND ADMINISTERS FUNDS FOR CHARITABLE AND PUBLIC PURPOSES, PRIMARILY PERMANENT ENDOWED FUNDS FOR THE SPRINGFIELD METROPOLITAN AREA, REGIONAL COMMUNITY FOUNDATIONS AND THE SOUTHERN TIER OF MISSOURI

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 14,271,450.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Main form area containing questions 1a through 14b with corresponding Yes/No columns and data entry fields.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	21		
b	Enter the number of voting members included in line 1a, above, who are independent		
	21		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **SUSANNE GRAY - (417) 864-6199**
P.O. BOX 8960, SPRINGFIELD, MO 65801

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRIAN FOGLE PRESIDENT	40.00	X		X				129,731.	0.	24,586.
(2) JILL REYNOLDS PAST CHAIRMAN	2.00	X		X				0.	0.	0.
(3) SHARI HOFFMAN TREASURER	2.00	X		X				0.	0.	0.
(4) ROGER D. SHAW SECRETARY	2.00	X		X				0.	0.	0.
(5) GLORIA GALANES CHAIRMAN	2.00	X		X				0.	0.	0.
(6) MARGIE BERRY BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(7) JUDITH GONZALEZ BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(8) BILL LEE BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(9) KAREN MILLER REGIONAL REPRESENTATIVE	2.00	X						0.	0.	0.
(10) MARK NELSON IAB REPRESENTAVE	2.00	X						0.	0.	0.
(11) SANDRA THOMASON BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(12) CHRIS CRAIG BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(13) ROB FOSTER BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(14) BRIAN HAMMONS BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(15) JAMI S PEBLES AT-LARGE REPRESENTATIBVE	2.00	X						0.	0.	0.
(16) ROBIN WALKER BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(17) RON PENNEY BOARD OF DIRECTORS	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RANDY HOWARD BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(19) GARY A. POWELL BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(20) STEPHANIE STENGER MONTGOMERY BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(21) ROSALIE WOOTEN BOARD OF DIRECTORS	2.00	X						0.	0.	0.
(22) RICHARD CAVENDER CHAIR ELECT	2.00	X		X				0.	0.	0.
(23) SUSANNE GRAY ASSISTANT SECRETARY	40.00			X				95,912.	0.	18,309.
1b Sub-total								225,643.	0.	42,895.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								225,643.	0.	42,895.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	15,503,566.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		15,503,566.				
	Program Service Revenue	2 a		Business Code				
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3,388,059.			3,388,059.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	(ii) Personal				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
		Net gain or (loss)			1,166,025.			1,166,025.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		Less: direct expenses	b					
		Net income or (loss) from fundraising events						
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
Less: direct expenses		b						
Net income or (loss) from gaming activities								
10 a	Gross sales of inventory, less returns and allowances	a						
	Less: cost of goods sold	b						
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a	MANAGEMENT FEES	900099	333,639.	333,639.				
b	OTHER REVENUES	900099	7,499.	7,499.				
c								
d	All other revenue							
e	Total. Add lines 11a-11d		341,138.					
12	Total revenue. See instructions.		20,398,788.	341,138.	0.	4,554,084.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	11,949,853.	11,949,853.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	2,321,597.	2,321,597.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	281,795.		238,716.	43,079.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	798,460.		798,460.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	34,544.		34,544.	
9 Other employee benefits	141,028.		141,028.	
10 Payroll taxes	75,009.		75,009.	
11 Fees for services (non-employees):				
a Management				
b Legal	15,874.		15,874.	
c Accounting	23,100.		23,100.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,300,104.		1,300,104.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	177,453.		177,453.	
14 Information technology				
15 Royalties				
16 Occupancy	40,990.		40,990.	
17 Travel	18,914.		18,914.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	11,531.		11,531.	
20 Interest	16,588.		16,588.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	39,038.		39,038.	
23 Insurance	36,599.		36,599.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER EXPENSES	500,054.		500,054.	
b PREMIUM EXPENSE	70,605.		70,605.	
c DONOR RECOGNITION	38,137.		38,137.	
d FINANCIAL SOFTWARE	22,946.		22,946.	
e All other expenses	34,519.		34,519.	
25 Total functional expenses. Add lines 1 through 24e	17,948,738.	14,271,450.	3,634,209.	43,079.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A)		(B)		
		Beginning of year		End of year		
Assets	1 Cash - non-interest-bearing		1			
	2 Savings and temporary cash investments	40,880,287.	2	45,336,891.		
	3 Pledges and grants receivable, net	756,874.	3	761,447.		
	4 Accounts receivable, net		4			
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5			
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6			
	7 Notes and loans receivable, net		7			
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges		9			
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 14,080,655.				
	b Less: accumulated depreciation	10b 451,563.	13,706,408.	10c	13,629,092.	
	11 Investments - publicly traded securities	811,373.	11	796,422.		
	12 Investments - other securities. See Part IV, line 11	164,266,307.	12	191,490,224.		
	13 Investments - program-related. See Part IV, line 11		13			
	14 Intangible assets		14			
	15 Other assets. See Part IV, line 11	1,862,012.	15	1,880,727.		
16 Total assets. Add lines 1 through 15 (must equal line 34)	222,283,261.	16	253,894,803.			
Liabilities	17 Accounts payable and accrued expenses	530,677.	17	476,872.		
	18 Grants payable		18			
	19 Deferred revenue		19			
	20 Tax-exempt bond liabilities		20			
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21			
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22			
	23 Secured mortgages and notes payable to unrelated third parties		23			
	24 Unsecured notes and loans payable to unrelated third parties		24			
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	60,592,792.	25	85,698,497.		
	26 Total liabilities. Add lines 17 through 25	61,123,469.	26	86,175,369.		
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27 Unrestricted net assets	7,583,596.	27	9,054,691.		
	28 Temporarily restricted net assets	86,486,816.	28	90,910,274.		
	29 Permanently restricted net assets	67,089,380.	29	67,754,469.		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30 Capital stock or trust principal, or current funds		30			
	31 Paid-in or capital surplus, or land, building, or equipment fund		31			
	32 Retained earnings, endowment, accumulated income, or other funds		32			
	33 Total net assets or fund balances	161,159,792.	33	167,719,434.		
34 Total liabilities and net assets/fund balances	222,283,261.	34	253,894,803.			

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,398,788.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,948,738.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,450,050.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	161,159,792.
5	Net unrealized gains (losses) on investments	5	15,286,602.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-11,177,010.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	167,719,434.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2013)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11988264.	23560153.	16315524.	16580824.	15271657.	83716422.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	11988264.	23560153.	16315524.	16580824.	15271657.	83716422.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4235282.
6 Public support. Subtract line 5 from line 4.						79481140.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	11988264.	23560153.	16315524.	16580824.	15271657.	83716422.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2586567.	3098649.	3062477.	3494770.	2087955.	14330418.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						98046840.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	81.06	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	81.90	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization **COMMUNITY FOUNDATION OF THE OZARKS, INC.** Employer identification number **23-7290968**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	268	
2 Aggregate contributions to (during year)	2,533,616.	
3 Aggregate grants from (during year)	4,968,508.	
4 Aggregate value at end of year	42,190,438.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	90,336,417.	80,520,005.	82,582,642.	66,886,684.	58,008,461.
b Contributions	4,824,378.	6,640,927.	3,605,968.	10,446,739.	4,514,897.
c Net investment earnings, gains, and losses	12,063,751.	8,106,301.	-1,622,019.	11,802,392.	7,828,280.
d Grants or scholarships	4,060,287.	3,609,190.	2,779,295.	5,645,879.	2,685,243.
e Other expenditures for facilities and programs					17,033.
f Administrative expenses	1,498,753.	1,321,626.	1,267,291.	907,294.	762,678.
g End of year balance	101,665,506.	90,336,417.	80,520,005.	82,582,642.	66,886,684.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment .00 %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment .00 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	12,402,615.			12,402,615.
b Buildings		1,459,776.	291,955.	1,167,821.
c Leasehold improvements				
d Equipment		200,564.	156,651.	43,913.
e Other		17,700.	2,957.	14,743.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 13,629,092.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	2,079,010.	END-OF-YEAR MARKET VALUE
(3) Other		
(A) MONEY MARKET	1,221,357.	END-OF-YEAR MARKET VALUE
(B) NOTE RECEIVABLE	1,464,624.	END-OF-YEAR MARKET VALUE
(C) MUTUAL FUNDS	143,864,817.	END-OF-YEAR MARKET VALUE
(D) BONDS	3,680,776.	END-OF-YEAR MARKET VALUE
(E) HEDGE FUNDS	38,079,640.	END-OF-YEAR MARKET VALUE
(F) OTHER	1,100,000.	COST
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	191,490,224.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) AGENCY FUNDS	85,698,497.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	85,698,497.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	35,837,017.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	15,286,602.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,467,474.
e	Add lines 2a through 2d	2e	16,754,076.
3	Subtract line 2e from line 1	3	19,082,941.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1,315,847.
c	Add lines 4a and 4b	4c	1,315,847.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	20,398,788.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	18,116,107.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,467,474.
e	Add lines 2a through 2d	2e	1,467,474.
3	Subtract line 2e from line 1	3	16,648,633.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1,300,104.
c	Add lines 4a and 4b	4c	1,300,104.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	17,948,737.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

MANAGEMENT FEE EXPENSE 1,467,474.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

ANNUAL ACTUARIAL ADJUSTMENT 15,743.

INVESTMENT FEES NETTED AGAINST INCOME 1,300,104.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 1,315,847.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

MANAGEMENT EXPENSES 1,467,474.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number

23-7290968

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY 3322 S. CAMPBELL, #G SPRINGFIELD, MO 65807	23-7040934	501(C)(3)	100.	0.			MAKING STRIDES AGAINST BREAST CANCER
AMERICAN CANCER SOCIETY 3322 S. CAMPBELL, #G SPRINGFIELD, MO 65807	23-7040934	501(C)(3)	4,021.	0.			UNRESTRICTED FOR THE GREENE COUNTY AREA
AMERICAN CANCER SOCIETY 3322 S. CAMPBELL, #G SPRINGFIELD, MO 65807	23-7040934	501(C)(3)	8,625.	0.			UNRESTRICTED FOR MISSOURI DIVISION
AMERICAN CANCER SOCIETY 3322 S. CAMPBELL, #G SPRINGFIELD, MO 65807	23-7040934	501(C)(3)	131,399.	0.			CANCER RESEARCH
AMERICAN CANCER SOCIETY 3322 S. CAMPBELL, #G SPRINGFIELD, MO 65807	23-7040934	501(C)(3)	8,722.	0.			UNRESTRICTED FOR THE HEARTLAND DIVISION
AMERICAN HEART ASSOCIATION 2446 E. MADRID AVE. SPRINGFIELD, MO 65804	13-5613797	501(C)(3)	9,941.	0.			GO RED AND HEART WALK EVENTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **434.**

3 Enter total number of other organizations listed in the line 1 table ▶ **0.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HEART ASSOCIATION 2446 E. MADRID AVE. SPRINGFIELD, MO 65804	13-5613797	501(C)(3)	8,625.	0.			UNRESTRICTED FOR MISSOURI SOUTH CENTRAL REGION
BOYS & GIRLS CLUBS OF SPRINGFIELD 1410 N FREMONT AVE SPRINGFIELD, MO 65802	44-0513659	501(C)(3)	8,513.	0.			SUPPORT FOR CHILDREN
BOYS & GIRLS CLUBS OF SPRINGFIELD 1410 N FREMONT AVE SPRINGFIELD, MO 65802	44-0513659	501(C)(3)	983.	0.			SCHOLARSHIPS FOR LOW INCOME CHILDREN
BOYS & GIRLS CLUBS OF SPRINGFIELD 1410 N FREMONT AVE SPRINGFIELD, MO 65802	44-0513659	501(C)(3)	1,000.	0.			BRIGHT FUTURES CAPITAL CAMPAIGN
BOYS & GIRLS TOWN OF MISSOURI: GREAT CIRCLE - 1212 W LOMBARD ST - SPRINGFIELD, MO 65806	43-0681471	501(C)(3)	13,300.	0.			SERVICES FOR CHILDREN
CAMP BARNABAS PO BOX 3200 SPRINGFIELD, MO 65808	33-1122930	501(C)(3)	8,051.	0.			SUPPORT FOR CAMP MAINTENANCE
CARE TO LEARN - BOLIVAR FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	7,965.	0.			HEALTH.HUNGER.HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - CLEVER FUND 425 EAST TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	6,318.	0.			HEALTH.HUNGER.HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - FORDLAND FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	6,621.	0.			HEALTH.HUNGER.HYGIENE AID FOR AT RISK SCHOOL CHILDREN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARE TO LEARN - HURLEY FUND 425 EAST TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,000.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - NIXA FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	15,555.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - OZARK FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	11,939.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - REPUBLIC FUND 425 E. TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	11,590.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - ROGERSVILLE FUND 425 E. TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	11,132.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - SPRINGFIELD FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	20,021.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN - WILLARD FUND 425 E. TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	18,207.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CARE TO LEARN 411 N SHERMAN PKWY SPRINGFIELD, MO 65802	47-1494384	501(C)(3)	16,800.	0.			HEALTH,HUNGER,HYGIENE AID FOR AT RISK SCHOOL CHILDREN
CASA METRO SPGF LD CHALLENGE GRANT FUND - 425 E. TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA OF SOUTH CENTRAL MISSOURI 200 N. MAIN ST., STE. 242 ROLLA, MO 65401	20-2021790	501(C)(3)	24,714.	0.			COURT ASSISTANCE FOR NEGLECTED CHILDREN
CASCIA HALL FOUNDATION 2520 S YORKTOWN AVE TULSA, OK 74114	73-1567543	501(C)(3)	2,500.	0.			BASEBALL SCOREBOARD
CASCIA HALL FOUNDATION 2520 S YORKTOWN AVE TULSA, OK 74114	73-1567543	501(C)(3)	3,750.	0.			UNRESTRICTED
CASCIA HALL FOUNDATION 2520 S YORKTOWN AVE TULSA, OK 74114	73-1567543	501(C)(3)	3,000.	0.			BASEBALL PROGRAM SUPPORT
CATHOLIC CHARITIES OF SOUTHERN MISSOURI - 424 EAST MONASTERY STREET - SPRINGFIELD, MO 65807	80-0455890	501(C)(3)	64,028.	0.			CARE FOR HOMELESS MOTHERS
CATHOLIC CHARITIES OF SOUTHERN MO METRO SGF CHALLENGE GRANT FUND - PO BOX 8960 - SPRINGFIELD, MO 65801	23-7290968	501(C)(3)	8,214.	0.			CATHOLIC CHARITIES OF SOUTHERN MO METRO SGF CHALLENGE GRANT FUND
CEDAR FALLS HIGH SCHOOL 1015 DIVISION STREET CEDAR FALLS, IA 50613	42-0862684	501(C)(3)	7,448.	0.			SCHOLARSHIPS AND CURRICULUM
CHILD ADVOCACY CENTER METRO SGF CHALLENGE GRANT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES
CHILDREN'S HAVEN OF SOUTHWEST MISSOURI FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,000.	0.			RESILIENCY TRAINING IMPLEMENTATION GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HAVEN OF SOUTHWEST MISSOURI - 701 S. PICHER - JOPLIN, MO 64801	04-3603881	501(C)(3)	95,616.	0.			TEMPORARY SHELTER FOR CHILDREN
CHILDREN'S SMILE CENTER PO BOX 1833 OZARK, MO 65721	57-1196229	501(C)(3)	24,402.	0.			CHILDREN'S DENTAL NEEDS
CHRIST EPISCOPAL CHURCH 601 E WALNUT ST SPRINGFIELD, MO 65806-3560	43-1657802	501(C)(3)	23,296.	0.			UNRESTRICTED
CHRISTIAN ACTION MINISTRIES 610 S. 6TH STREET, STE. 102 BRANSON, MO 65616	43-1355905	501(C)(3)	10,000.	0.			UNRESTRICTED
CHRISTIAN COUNTY MUSEUM AND HISTORICAL SOCIETY - PO BOX 442 - OZARK, MO 65721	43-1114915	501(C)(3)	6,672.	0.			UNRESTRICTED
CHRISTIAN RENEWAL ASSOCIATION PO BOX 576 EDMONDS, WA 98020	91-1291259	501(C)(3)	5,000.	0.			UNRESTRICTED
CITIZENS AGAINST DOMESTIC VIOLENCE PO BOX 245 CAMDENTON, MO 65020	43-1371497	501(C)(3)	5,750.	0.			NEEDED SERVICES FOR VICTIMS
CITY OF DUQUESNE 1501 S. DUQUESNE JOPLIN, MO 64801	43-1134864	501(C)(3)	9,990.	0.			EMERGENCY DISASTER RESILIENCE AND PROTECTION
CITY OF MOUNTAIN GROVE PO BOX 351 MOUNTAIN GROVE, MO 65711	44-6000227	501(C)(3)	2,350.	0.			FOR SENIOR CENTER PATRONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF MOUNTAIN GROVE PO BOX 351 MOUNTAIN GROVE, MO 65711	44-6000227	501(C)(3)	5,910.	0.			HUMAN SERVICES
CITY OF SEYMOUR PO BOX 247 SEYMOUR, MO 65746	44-6005586	501(C)(3)	15,460.	0.			LIBRARY EXPENSES
CITY OF STE. GENEVIEVE POLICE DEPARTMENT - 165 SOUTH 4TH STREET - STE. GENEVIEVE, MO 63670	43-6003164	501(C)(3)	9,645.	0.			COMMUNITY SAFETY PROGRAM
CITY OF STE. GENEVIEVE 165 S. FOURTH ST STE GENEVIEVE, MO 63670	43-6003164	501(C)(3)	10,000.	0.			COMMUNITY BETTERMENT
CLARK COMMUNITY MENTAL HEALTH CENTER - PO BOX 100 - PIERCE CITY, MO 65723	23-7218344	501(C)(3)	8,284.	0.			HEALTH AND HUMAN SERVICES
CLINTON UNITED METHODIST CHURCH 601 S 4TH ST. CLINTON, MO 64735	44-0590276	501(C)(3)	16,331.	0.			UNRESTRICTED
COLLEGE OF THE OZARKS P.O. BOX 17 POINT LOOKOUT, MO 65726	44-0556862	501(C)(3)	7,500.	0.			EDUCATIONAL PROGRAM
COMMUNITIES OF RECOVERY -- CORE 602 SOUTH 6TH STREET BRANSON, MO 65615	46-1516182	501(C)(3)	502.	0.			FOR SUBSTANCE ABUSE RECOVERY PROGRAM
COMMUNITIES OF RECOVERY -- CORE 602 SOUTH 6TH STREET BRANSON, MO 65615	46-1516182	501(C)(3)	35,433.	0.			UNRESTRICTED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY FOUNDATION OF THE OZARKS 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	10,000.	0.			GRANTMAKING SERVICES
COMMUNITY FOUNDATION OF THE OZARKS 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	7,100.	0.			UNRESTRICTED
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	428.	0.			EDUCATIONAL PROGRAMMING-CORE COMPETENCY MATERIALS, RELATED TRAINING
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	20,000.	0.			FINANCIAL LITERACY FOR LOW TO MODERATE INCOME INDIVIDUALS
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	12,000.	0.			HOUSING RESOURCE
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	3,000.	0.			HOMELESS PREVENTION THROUGH AFFORDABLE HOUSING RESOURCES
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	11,883.	0.			EDUCATIONAL PROGRAMMING-CORE COMPETENCY MATERIALS, RELATED TRAINING
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	1,300.	0.			HOPE CONNECTION
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	8,844.	0.			HUMAN SERVICES

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY THEATRE FOR SOUTHWEST MISSOURI - 796 S. STONE LANE - CARTHAGE, MO 64836	43-1453653	501(C)(3)	8,800.	0.			COMMUNITY BETTERMENT
CONNECTING POINT CHURCH 11268 FOREST DRIVE COLLEGE STATION, TX 77845	27-3413557	501(C)(3)	25,000.	0.			FAITH PROGRAMMING - THE HINGE
CONSUMER CREDIT COUNSELING METRO SPF CHALLENGE GRANT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES
CONVOY OF HOPE 1660 N CAMPBELL AVE SPRINGFIELD, MO 65803	68-0051386	501(C)(3)	924.	0.			HAITI WATER FILTER PROJECT
CONVOY OF HOPE 1660 N CAMPBELL AVE SPRINGFIELD, MO 65803	68-0051386	501(C)(3)	3,000.	0.			WOMEN'S EMPOWERMENT PROGRAM
CONVOY OF HOPE 1660 N CAMPBELL AVE SPRINGFIELD, MO 65803	68-0051386	501(C)(3)	5,000.	0.			MWAYA EMPOWERED GIRLS TUTOR PROJECT
CONVOY OF HOPE 1660 N CAMPBELL AVE SPRINGFIELD, MO 65803	68-0051386	501(C)(3)	3,150.	0.			TANZANIA/MABABU TEXTBOOKS, SANITATION SEMINAR MABABU MOTHERS
CONVOY OF HOPE 1660 N CAMPBELL AVE SPRINGFIELD, MO 65803	68-0051386	501(C)(3)	250.	0.			PHILIPPINE RELIEF
CONVOY OF HOPE 1660 N CAMPBELL AVE SPRINGFIELD, MO 65803	68-0051386	501(C)(3)	14,700.	0.			UNRESTRICTED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COOPERATIVE BAPTIST FELLOWSHIP HEARTLAND - PO BOX 679 - LIBERTY, MO 64069	43-1583837	501(C)(3)	14,400.	0.			UNRESTRICTED
CORVALLIS WALDORF SCHOOL 3855 NE HIGHWAY 20 CORVALLIS, OR 97330	93-1121512	501(C)(3)	10,000.	0.			CAPITAL CAMPAIGN
COUNCIL FOR A HEALTHY DENT COUNTY PO BOX 190 SALEM, MO 65560	27-2353430	501(C)(3)	5,000.	0.			UNRESTRICTED
COUNCIL OF CHURCHES OF THE OZARKS PO BOX 3947 SPRINGFIELD, MO 65808	43-0903657	501(C)(3)	10,916.	0.			EDUCATIONAL PROGRAMMING-STAFF AND OPERATIONAL EXPENSES RELATED TO CHILD CARE
COUNCIL OF CHURCHES OF THE OZARKS PO BOX 3947 SPRINGFIELD, MO 65808	43-0903657	501(C)(3)	10,000.	0.			COMPASSION CAMPAIGN
COUNCIL OF CHURCHES OF THE OZARKS PO BOX 3947 SPRINGFIELD, MO 65808	43-0903657	501(C)(3)	13,542.	0.			UNRESTRICTED
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	4,800.	0.			HEALTH INCENTIVE AWARDS
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	4,900.	0.			DIETITIAN BASED FOOD ASSESSMENT
COX COLLEGE OF NURSING 3801 S NATIONAL SPRINGFIELD, MO 65807	44-0577118	501(C)(3)	13,000.	0.			NURSING SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	4,000.	0.			COLO RECTAL AWARENESS
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	2,500.	0.			FOOD FOR WOMEN'S HEART
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	10,000.	0.			2013 COX HEALTH HEART & VASCULAR SUMMIT
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	25,000.	0.			MARTIN CENTER FUNDING
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	4,500.	0.			UNRESTRICTED
CRAWFORD COUNTY FOUNDATION, INC. 34 VILLAGE @ 4 CUBA, MO 65453	43-1941534	501(C)(3)	10,000.	0.			TO BENEFIT CUBA DEVELOPMENT GROUP - COMMUNITY BETTERMENT
CRAWFORD COUNTY FOUNDATION, INC. 34 VILLAGE @ 4 CUBA, MO 65453	43-1941534	501(C)(3)	10,000.	0.			TO BENEFIT ALL ABOARD LEARNING CENTER FUN RUN
CRAWFORD COUNTY FOUNDATION, INC. 34 VILLAGE @ 4 CUBA, MO 65453	43-1941534	501(C)(3)	4,431.	0.			CONSERVATION SITE VISITING AND RECORDING
CROSSLINES METRO SGF CHALLENGE GRANT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			COMMUNITY BETTERMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSSLINES 615 N GLENSTONE SPRINGFIELD, MO 65802	43-0903657	501(C)(3)	19,661.	0.			UNRESTRICTED
CUBA DEVELOPMENT GROUP PO BOX 242 CUBA, MO 65453	27-1567977	501(C)(3)	25,000.	0.			COMMUNITY BETTERMENT
CYSTIC FIBROSIS FOUNDATION 6950 SQUIBB ROAD, SUITE 310 MISSION, KS 66202	13-1930701	501(C)(3)	10,000.	0.			UNRESTRICTED
DADE COUNTY HEALTH DEPARTMENT 413 W WATER ST GREENFIELD, MO 65661	43-1266535	501(C)(3)	10,700.	0.			COMMUNITY BETTERMENT
DALLAS COUNTY HEALTH DEPARTMENT PO BOX 199 BUFFALO, MO 65622	43-1268846	501(C)(3)	5,000.	0.			FOR BRIGHT SMILES PROGRAM
DALLAS COUNTY R-I SCHOOL DISTRICT 309 W COMMERCIAL ST BUFFALO, MO 65622	44-6001998	501(C)(3)	1,245.	0.			UPGRADING SOUND SYSTEM
DALLAS COUNTY R-I SCHOOL DISTRICT 309 W COMMERCIAL ST BUFFALO, MO 65622	44-6001998	501(C)(3)	10,000.	0.			PLACE-BASED EDUCATION
DENT COUNTY ANIMAL WELFARE SOCIETY 230 COUNTY ROAD 2630 SALEM, MO 65560	43-1561296	501(C)(3)	5,000.	0.			UNRESTRICTED
DEVELOPMENTAL CENTER OF THE OZARKS 1545 E PYTHIAN SPRINGFIELD, MO 65802	44-0614402	501(C)(3)	39,700.	0.			SERVICES FOR DEVELOPMENTALLY CHALLENGED

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIOCESE OF SPFLD-CAPE GIRARDEAU 601 S. JEFFERSON SPRINGFIELD, MO 65806	44-0609997	501(C)(3)	12,200.	0.			UNRESTRICTED
DISCOVERY CENTER 438 E ST LOUIS ST SPRINGFIELD, MO 65806	43-1568214	501(C)(3)	2,600.	0.			NEW EXHIBIT/MICROSCOPE FOR LIFESCIENCES GALLERY
DISCOVERY CENTER 438 E ST LOUIS ST SPRINGFIELD, MO 65806	43-1568214	501(C)(3)	3,000.	0.			UNRESTRICTED
DOLLYWOOD FOUNDATION 2700 DOLLYWOOD PARK BLVD PIGEON FORGE, TN 37863-4113	62-1348105	501(C)(3)	6,854.	0.			EDUCATIONAL PROGRAMMING
DOULA FOUNDATION METRO SGF CHALLENGE GRANT FUND - PO BOX 8960 - SPRINGFIELD, MO 65801	23-7290968	501(C)(3)	8,214.	0.			DOULA FOUNDATION METRO SGF CHALLENGE GRANT FUND
DOULA FOUNDATION OF MID AMERICA 330 N JEFFERSON SPRINGFIELD, MO 65806	30-0046369	501(C)(3)	31,729.	0.			UNRESTRICTED
DR MARY KING LONG SCHOLARSHIP ACCT ATTN: CHRISTINA SCHANDA, TREAS FORSYTH, MO 65653	23-7290968	501(C)(3)	14,000.	0.			SCHOLARSHIP GRANTS
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	1,500.	0.			2014 SELF EMPLOYMENT IN THE ARTS CONFERENCE
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	2,500.	0.			ECONOMIC IMPACT STUDY ON NON- PROFITS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	825.	0.			SCHOLARSHIP FOR MATHEMATIC STUDENT
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	12,000.	0.			PRE-MED SCHOLARSHIPS
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	389.	0.			BOOKS FOR LIBRARY
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	6,195.	0.			SUMMERSCAPE & THE DRURY LEADERSHIP ACADEMY - EDUCATIONAL PROGRAM
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	25,000.	0.			CENTER FOR NON-PROFIT COMMUNICATION
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	1,500.	0.			SCHOLARSHIP FOR PRE-MED, BIOLOGY, CHEMISTRY, PHYSICS OR MATHEMATICS STUDENT
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	124,131.	0.			EDUCATIONAL PROGRAMMING
EL DORADO SPRINGS R-2 SCHOOLS 901 S. GRAND EL DORADO SPRINGS, MO 64744	44-6001481	501(C)(3)	5,109.	0.			EDUCATIONAL PROGRAMS
ELDON AREA COMMUNITY BETTERMENT ASSOCIATION - 112 S PINE - ELDON, MO 65026	43-1881618	501(C)(3)	9,081.	0.			CHILDREN EDUCATION AND HEALTH PROGRAMS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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ELDON R-1 SCHOOL DISTRICT 112 S PINE ELDON, MO 65026	44-6002437	501(C)(3)	8,431.	0.			BACKPACK PROGRAM FOR CHILDREN
EQUI-LIBRIUM THERAPY CENTER FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	152,940.	0.			EQUINE THERAPY RIDING
EVANGEL UNIVERSITY 1111 N GLENSTONE SPRINGFIELD, MO 65802	44-0589787	501(C)(3)	2,500.	0.			STRAUS SCHOLARSHIP GRANT - PROVISO FOR BLDG & GROUNDS MAINTENANCE
EVANGEL UNIVERSITY 1111 N GLENSTONE SPRINGFIELD, MO 65802	44-0589787	501(C)(3)	12,000.	0.			PRE-MED SCHOLARSHIPS
EVANGELICAL FREE CHURCH OF AMERICA 901 EAST 78TH STREET MINNEAPOLIS, MN 55420	41-0721672	501(C)(3)	7,400.	0.			MISSIONARY FUNDING
EVERY CHILD INITIATIVE FUND 425 EAST TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	70,812.	0.			UNRESTRICTED
EXCHANGE BANK SCHOLARSHIP FUND 425 EAST TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	18,100.	0.			SCHOLARSHIPS
FAITH ASSEMBLY OF GOD OF JOPLIN 7211 E. 32ND ST. JOPLIN, MO 64804	44-0650249	501(C)(3)	50,000.	0.			FAITH BASED PROJECT
FAITH COMMUNITY HEALTH CENTER, INC. - 610 SOUTH SIXTH STREET - BRANSON, MO 65616	94-3467834	501(C)(3)	20,000.	0.			UNRESTRICTED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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FAMILY INSTITUTE OF THE OZARKS (FIO) FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,000.	0.			SOAR
FAMILY MATTERS RESOURCE CENTER METRO SGF CHALLENGE GRANT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES
FELLOWSHIP OF CHRISTIAN ATHLETES 3259 E SUNSHINE, SUITE G SPRINGFIELD, MO 65804	44-0610626	501(C)(3)	5,000.	0.			UNRESTRICTED
FIRST & CALVARY PRESBYTERIAN CHURCH - 820 E CHERRY ST - SPRINGFIELD, MO 65806	44-0555219	501(C)(3)	24,535.	0.			UNRESTRICTED
FIRST BAPTIST CHURCH - MIAMI, OK PO BOX 1030 MIAMI, OK 74355	73-0634803	501(C)(3)	50,000.	0.			AFRICIA MISSION ACCOUNT
FIRST BAPTIST CHURCH 209 E JEFFERSON CLINTON, MO 64735	44-0596781	501(C)(3)	508,500.	0.			UNRESTRICTED
FIRST BAPTIST CHURCH 316 N MAIN BOLIVAR, MO 65613	44-0606423	501(C)(3)	18,400.	0.			UNRESTRICTED FOR LOCAL USE
FIRST CHRISTIAN CHURCH - BOLIVAR 407 WEST BROADWAY STREET BOLIVAR, MO 65613	44-0552076	501(C)(3)	22,100.	0.			FAITH BASED PROGRAMS
FIRST PRESBYTERIAN CHURCH 115 W. CHESTNUT ST. CARTHAGE, MO 64836	44-0606868	501(C)(3)	8,961.	0.			UNRESTRICTED

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FIRST UNITED METHODIST CHURCH OF CARTHAGE - 617 S MAIN STREET - CARTHAGE, MO 64836	44-0615076	501(C)(3)	13,409.	0.			UNRESTRICTED
FOOD FOR THE POOR, INC. 6401 LYONS RD COCONUT CREEK, FL 33073	59-2174510	501(C)(3)	15,000.	0.			HUMAN SERVICES
FOODCORE PO BOX 41 ROGERSVILLE, MO 65742	27-1883334	501(C)(3)	12,000.	0.			COMMUNITY GARDEN PROJECT
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	1,101.	0.			EDUCATIONAL PROGRAMMING-RESOURCE PACKPACKS
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	2,000.	0.			CHOCOLATE UNIVERSITY PROGRAM
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	2,500.	0.			ED PROGRAM - ACTIVITIES BUDGET & EQUIPMENT FOR DISCOVERY CENTER STEM SCHOOL
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	2,500.	0.			ED PROGRAM - ACTIVITIES BUDGET & EQUIPMENT FOR HEALTH SCIENCES ACADEMY-MERCY
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	855.	0.			ED PROGRAM - ACTIVITIES BUDGET & FEES FOR DISCOVERY CENTER FOR SPRINGFIELD OPTION SITE
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	2,499.	0.			ED PROGRAM - TECHNOLOGY FOR BOWERMAN SCHOOL

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	2,500.	0.			ED PROGRAM - TECHNOLOGY FOR GLENDALE/BINGHAM PROJECT
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	2,500.	0.			ED PROGRAM - TECHNOLOGY FOR KICKAPOO/GLENDALE VIRTUAL CLASSROOM
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	496.	0.			ED PROGRAM - TECHNOLOGY FOR PERSHING SCHOOL
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	872.	0.			ED PROGRAM - TICKETING & TRANSPORTATIONS COSTS FOR DELAWARE SCHOOL
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	20,100.	0.			EMERGENCY PREPAREDNESS INITIATIVE
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	1,983.	0.			EDUCATIONAL PROGRAMMING-RESOURCE PACKPACKS
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	5,000.	0.			HEALTH SCIENCES IMMERSION PROGRAM FOR 50 STUDENTS/LAB EQUIPMENT
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	500.	0.			LASSIES DRUM CROPS - PARKVIEW HIGH SCHOOL
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	250.	0.			NEW FENCE FOR BOYD SCHOOL

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	250.	0.			READING ROUNDUP
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	29,781.	0.			UNRESTRICTED
FRIENDS OF STE. GENEVIEVE COUNTY MEMORIAL HOSPITAL - 800 STE. GENEVIEVE DRIVE - STE. GENEVIEVE, MO 63670	84-1633893	501(C)(3)	15,000.	0.			FOR MEDICAL EQUIPMENT
FRIENDS OF THE CHRISTIAN COUNTY MUSEUM FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	62,963.	0.			COMMUNITY BETTERMENT
FRIENDS OF THE GARDEN PO BOX 8566 SPRINGFIELD, MO 65801	43-1898848	501(C)(3)	22,800.	0.			PARK SUPPORT
FRIENDS OF THE ZOO 3043 N FORT ST SPRINGFIELD, MO 65803	23-7096596	501(C)(3)	5,000.	0.			UNRESTRICTED
GALENA COMMUNITY CHURCH P. O. BOX 66 GALENA, MO 65656	43-1107586	501(C)(3)	5,196.	0.			GENERAL SUPPORT
GASCONADE COUNTY R-1 SCHOLARSHIP FUND - 425 E. TRAFFICWAY - SPRINGFIELD, MO 65804	23-7290968	501(C)(3)	6,000.	0.			EDUCATIONAL PROGRAM
GASCONADE COUNTY R-1 SCHOOL DISTRICT - 164 BLUE PRIDE DR - HERMANN, MO 65041	43-6015434	501(C)(3)	33,471.	0.			EDUCATIONAL PROGRAMMING

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GENERATIONS OF VIRTUE 16182 TIMBER MEADOW DRIVE COLORADO SPRINGS, CO 80908	14-1875193	501(C)(3)	5,000.	0.			UNRESTRICTED
GENEROUS COMMUNITY FUND 425 EAST TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	6,000.	0.			GENEROUS COMMUNITY CAMPAIGN
GIRLS ON THE RUN SOUTHWEST MISSOURI - PO BOX 14216 - SPRINGFIELD, MO 65814	56-2201835	501(C)(3)	14,000.	0.			PROGRAMMING NEEDS
GOOD SAMARITAN BOYS RANCH PO BOX 617 BRIGHTON, MO 65617	44-6006077	501(C)(3)	500.	0.			FIRST AID/CPR TRAINING
GOOD SAMARITAN BOYS RANCH PO BOX 617 BRIGHTON, MO 65617	44-6006077	501(C)(3)	11,000.	0.			UNRESTRICTED
GOOD SHEPHERD LUTHERAN CHURCH 8975 COUNTY LANE 170 CARTHAGE, MO 64836	43-1454432	501(C)(3)	6,348.	0.			UNRESTRICTED
GORDON COLLEGE 255 GRAPEVINE COLLEGE WENHAM, MA 01984	04-2104258	501(C)(3)	60,000.	0.			UNRESTRICTED
GRACE EPISCOPAL CHURCH PO BOX 596 CARTHAGE, MO 64836	44-0608719	501(C)(3)	13,819.	0.			UNRESTRICTED
GREAT MISSOURI BIRDING TRAIL FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	25,000.	0.			NATURE AND ENVIRONMENT PROJECT

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GREAT MISSOURI BIRDING TRAIL 618 BRIGHTON COURT ROLLA, MO 65401	46-4765438	501(C)(3)	10,066.	0.			ENVIRONMENTAL CONSERVATION AND REPORTING
GREATER SEYMOUR AREA FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	6,300.	0.			UNRESTRICTED
GREATER SPRINGFIELD YOUNG LIFE MO 29 - P.O. BOX 682 - SPRINGFIELD, MO 65801	84-0385934	501(C)(3)	5,000.	0.			UNRESTRICTED
GREENE COUNTY MEDICAL SOCIETY ALLIANCE - 1200 E WOODHURST DR STE D200 - SPRINGFIELD, MO 65804	44-0515179	501(C)(3)	5,500.	0.			DOCTOR'S DAY
GREENE COUNTY SENIOR BOARD PO BOX 9766 SPRINGFIELD, MO 65804	37-1709405	501(C)(3)	40,000.	0.			FUNDS FOR SENIOR ISSUES COLLABORATIVE GRANTS
GRUPO LATINOAMERICANO 918 E. CALHOUN SPRINGFIELD, MO 65802	43-1527417	501(C)(3)	5,000.	0.			UNRESTRICTED
GYN CANCERS ALLIANCE 3023 SOUTH FORT, SUITE D SPRINGFIELD, MO 65807	43-1943170	501(C)(3)	33,662.	0.			UNRESTRICTED
HABITAT FOR HUMANITY 121 HABITAT ST. AMERICAS, GA 31709	91-1914868	501(C)(3)	10,000.	0.			UNRESTRICTED
HALFWAY R-III SCHOOL DISTRICT 2150 HIGHWAY 32 HALFWAY, MO 65663	44-6001400	501(C)(3)	7,705.	0.			EDUCATIONAL PURPOSES EXCLUDING ATHLETICS

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HARMONY HOUSE PO BOX 5972 SPRINGFIELD, MO 65801	43-1082063	501(C)(3)	2,000.	0.			UNRESTRICTED
HARMONY HOUSE PO BOX 5972 SPRINGFIELD, MO 65801	43-1082063	501(C)(3)	5,000.	0.			RESILIENT COMMUNITY DISASTER PREPAREDNESS
HEART OF AFRICA PO BOX 5 WILMORE, KY 40390	35-2121414	501(C)(3)	17,000.	0.			UNRESTRICTED
HEART OF THE OZARKS JUNIOR GOLF FOUNDATION - 496 HWY 60 E - REPUBLIC, MO 65738	43-1927962	501(C)(3)	10,000.	0.			COMMUNITY BETTERMENT
HEARTLIGHT MINISTRIES FOUNDATION PO BOX 480 HALLSVILLE, TX 75650	20-3179800	501(C)(3)	25,000.	0.			UNRESTRICTED
HEIFER INTERNATIONAL PO BOX 8058 LITTLE ROCK, AR 72203	35-1019477	501(C)(3)	5,000.	0.			UNRESTRICTED
HELP GIVE HOPE 2733 E. BATTLEFIELD #332 SPRINGFIELD, MO 65804	43-1727982	501(C)(3)	23,500.	0.			UNRESTRICTED
HELPS INTERNATIONAL, INC. 15301 DALLAS PARKWAY, STE. 200 ADDISON, TX 75001	75-1966419	501(C)(3)	12,500.	0.			FLOORS, COOKSTOVES, WATER FILTERS FOR MAYAN PEOPLE OF GUATEMALA
HENRY COUNTY LIBRARY 123 E. GREEN STREET CLINTON, MO 64735	44-6000511	501(C)(3)	7,500.	0.			UNRESTRICTED

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HOLY TRINITY CATHOLIC CHURCH 2818 E BENNETT ST SPRINGFIELD, MO 65804	43-0889012	501(C)(3)	7,500.	0.			SERVICES & PROGRAMS
HOSPICE FOUNDATION OF THE OZARKS PO BOX 9226 SPRINGFIELD, MO 65801	43-1552783	501(C)(3)	5,331.	0.			UNRESTRICTED
HUMANE SOCIETY OF SOUTHWEST MISSOURI - 3161 W NORTON RD - SPRINGFIELD, MO 65803	44-0665046	501(C)(3)	136,481.	0.			HUMANE CARE OF ANIMALS
HUMANITARIAN INTERNATIONAL SERVICES GROUP - P.O. BOX 50347 - COLORADO SPRINGS, CO 80949	10-0001329	501(C)(3)	5,000.	0.			UNRESTRICTED
ISABEL'S HOUSE - CRISIS NURSERY OF THE OZARKS - 2750 W BENNETT ST - SPRINGFIELD, MO 65802	20-4574229	501(C)(3)	5,000.	0.			UPGRADE TECHNOLOGY
ISABEL'S HOUSE - CRISIS NURSERY OF THE OZARKS - 2750 W BENNETT ST - SPRINGFIELD, MO 65802	20-4574229	501(C)(3)	5,000.	0.			HUMAN SERVICES
JAMES RIVER CHURCH 6100 N 19TH ST OZARK, MO 65721	43-1564676	501(C)(3)	18,000.	0.			BIBLE FOR CHILDREN IN ROMANIA
JAMES RIVER CHURCH 6100 N 19TH ST OZARK, MO 65721	43-1564676	501(C)(3)	35,000.	0.			MISSIONS PROGRAMS
JAMES RIVER CHURCH 6100 N 19TH ST OZARK, MO 65721	43-1564676	501(C)(3)	8,100.	0.			HELP CHILDREN IN ORPHANAGE - ROMANIA

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JAMES RIVER CHURCH 6100 N 19TH ST OZARK, MO 65721	43-1564676	501(C)(3)	5,000.	0.			UNRESTRICTED
JEFFERSON AVENUE BAPTIST CHURCH 316 E. SUNSHINE SPRINGFIELD, MO 65807	01-2542687	501(C)(3)	3,492.	0.			SUPPORT FOR YOUTH MINISTRY
JEFFERSON AVENUE BAPTIST CHURCH 316 E. SUNSHINE SPRINGFIELD, MO 65807	01-2542687	501(C)(3)	2,283.	0.			SUPPORT FOR MISSIONS
JESUS WAS HOMELESS INC 1440 STATE HWY 248 STE Q 442 BRANSON, MO 65616	26-4727548	501(C)(3)	27,380.	0.			UNRESTRICTED
JOHN AND CULAH NIXON FAMILY FOUNDATION - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	11,781.	0.			UNRESTRICTED
JOHNSON COUNTY HISTORICAL SOCIETY CAPACITY BUILDING FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	50,000.	0.			UNRESTRICTED
JOPLIN AREA CHAMBER OF COMMERCE FOUNDATION - 320 E 4TH ST - JOPLIN, MO 64801	43-1569729	501(C)(3)	25,000.	0.			TORNADO RECOVERY ASSISTANCE
JOPLIN AREA FULLER CENTER FOR HOUSING - PO BOX 3805 - JOPLIN, MO 64803	45-4144496	501(C)(3)	31,000.	0.			HOUSING NEEDS FOR TORNADO VICTIMS IN POVERTY
JOPLIN AREA HABITAT FOR HUMANITY 5201 NORTH MAIN STREET JOPLIN, MO 64801	43-1524876	501(C)(3)	210,000.	0.			TORNADO RECOVERY ASSISTANCE

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOPLIN R-8 SCHOOL DISTRICT 1717 EAST 15TH STREET JOPLIN, MO 64804	44-6003106	501(C)(3)	20,000.	0.			REFORESTATION AT CECIL FLOYD ELEMENTARY & STAPLETON ELEMENTARY
JOPLIN R-8 SCHOOL DISTRICT 1717 EAST 15TH STREET JOPLIN, MO 64804	44-6003106	501(C)(3)	15,000.	0.			LANDSCAPING PROJECTS: COLUMBIA & WEST CENTRAL ELEMENTARY SCHOOLS
JOPLIN R-8 SCHOOL DISTRICT 1717 EAST 15TH STREET JOPLIN, MO 64804	44-6003106	501(C)(3)	45,465.	0.			OFFICE DEOPT SNACKPACKS
JORDAN VALLEY COMMUNITY HEALTH CENTER - PO BOX 5681 - SPRINGFIELD, MO 65801	43-1602701	501(C)(3)	17,047.	0.			MEDICAL ASSISTANCE
JUNIOR LEAGUE OF SPRINGFIELD, MISSOURI, INC. - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	6,662.	0.			COMMUNITY BETTERMENT
KANAKUK INSTITUTE 1353 LAKESHORE DRIVE BRANSON, MO 65616	43-1926319	501(C)(3)	28,000.	0.			UNRESTRICTED
KANSAS MASONIC HOME ENDOWMENT ASSOCIATION - 401 S SENECA STREET - WICHITA, KS 67213	48-1163199	501(C)(3)	6,007.	0.			UNRESTRICTED
K-LIFE MINISTRIES 1353 LAKESHORE DRIVE BRANSON, MO 65616	43-1538224	501(C)(3)	5,000.	0.			UNRESTRICTED
KOSHKONONG SCHOOL DISTRICT 100 SCHOOL STREET KOSHKONONG, MO 65692	43-6011932	501(C)(3)	1,298.	0.			FFA PROGRAM

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KOSHKONONG SCHOOL DISTRICT 100 SCHOOL STREET KOSHKONONG, MO 65692	43-6011932	501(C)(3)	10,000.	0.			PLACE-BASED EDUCATION
KSMU/OZARKS PUBLIC BROADCASTING 901 S NATIONAL SPRINGFIELD, MO 65804	44-6000308	501(C)(3)	26,000.	0.			TO SUPPORT OZARKS PUBLIC RADIO
LACLEDE COUNTY R-1 SCHOOL 726 W JEFFERSON CONWAY, MO 65632	44-6005870	501(C)(3)	9,457.	0.			PLACE-BASED EDUCATION
LAFAYETTE HOUSE PO BOX 1765 JOPLIN, MO 64802	43-1170015	501(C)(3)	200.	0.			UNRESTRICTED
LAFAYETTE HOUSE PO BOX 1765 JOPLIN, MO 64802	43-1170015	501(C)(3)	20,000.	0.			BACKUP GENERATOR FOR FACILITY
LAKE REGIONAL CANCER CENTER 54 HOSPITAL DRIVE OSAGE BEACH, MO 65065	23-7339737	501(C)(3)	9,221.	0.			TOTES FOR TATAS
LEAST OF THESE PO BOX 808 NIXA, MO 65714	43-1867039	501(C)(3)	7,800.	0.			GENERAL PURPOSES
LEE H. CRUSE SCHOLARSHIP FUND ANNUAL - 425 E. TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	7,642.	0.			FOR SCHOLARSHIPS
LIBERTY SCHOOL AT GRAY/CAMPBELL FARMSTEAD - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	45,000.	0.			EDUCATIONAL PROGRAMMING

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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LIFECHOICES 531 E 7TH ST JOPLIN, MO 64801	43-1518912	501(C)(3)	28,000.	0.			HUMAN SERVICES
LIFEHOUSE CRISIS MATERNITY HOME 424 E. MONASTARY ST. SPRINGFIELD, MO 65807	44-0609997	501(C)(3)	5,650.	0.			SCHOLARSHIPS FOR OTC/NUTRITION CURRICULUM
LIGHTHOUSE CHILD & FAMILY DEVELOPMENT CENTER - 900 N BENTON, LAY HALL 308B - SPRINGFIELD, MO 65802	26-2610308	501(C)(3)	8,639.	0.			EDUCATIONAL PROGRAMMING-FAMILY EDUCATION AND COMMUNITY RESOURCE MARKETING
LIVES UNDER CONSTRUCTION BOYS RANCH - 296 BOYS RANCH ROAD - LAMPE, MO 65681	46-0368556	501(C)(3)	8,000.	0.			UNRESTRICTED
LIVES UNDER CONSTRUCTION SHORT TERM FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	75,354.	0.			UNRESTRICTED
LOCKWOOD R-I SCHOOL DISTRICT 400 W 4TH ST LOCKWOOD, MO 65682	44-6003265	501(C)(3)	5,711.	0.			ART & OTHER EDUCATIONAL PROGRAMMING
LOGAN-ROGERSVILLE SCHOOL DISTRICT 100 E FRONT ST ROGERSVILLE, MO 65742	44-6005281	501(C)(3)	13,968.	0.			HEALTH.HUNGER.HYGIENE AID FOR AT RISK SCHOOL CHILDREN
LOST AND FOUND, INC 2840 EAST CHESTNUT EXPRESSWAY SPRINGFIELD, MO 65802	43-1896981	501(C)(3)	7,500.	0.			UNRESTRICTED
MACF CAPACITY TO SHARE FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,500.	0.			UNRESTRICTED

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MARSHFIELD AREA COMMUNITY FOUNDATION - PO BOX 427 - MARSHFIELD, MO 65706	23-7290968	501(C)(3)	6,000.	0.			COMMUNITY BETTERMENT
MEN AT THE CROSS 1353 LAKESHORE DRIVE BRANSON, MO 65616	26-2364202	501(C)(3)	50,000.	0.			UNRESTRICTED
MERCY HEALTH FOUNDATION SPRINGFIELD - 3265 S. NATIONAL AVE, SUITE 200 - SPRINGFIELD, MO 65807	32-0195818	501(C)(3)	3,092.	0.			HEALTH SERVICES FOR BURN VICTIMS
MERCY HEALTH FOUNDATION SPRINGFIELD - 3265 S. NATIONAL AVE, SUITE 200 - SPRINGFIELD, MO 65807	32-0195818	501(C)(3)	5,000.	0.			ADVANCING CARE TOGETHER CAPITAL CAMPAIGN
MERCY HEALTH FOUNDATION SPRINGFIELD - 3265 S. NATIONAL AVE, SUITE 200 - SPRINGFIELD, MO 65807	32-0195818	501(C)(3)	366.	0.			ASSISTANCE FOR STROKE VICTIMS
MERCY HEALTH FOUNDATION SPRINGFIELD - 3265 S. NATIONAL AVE, SUITE 200 - SPRINGFIELD, MO 65807	32-0195818	501(C)(3)	500.	0.			SAFE & SOBER 2014
MERCY HEALTH FOUNDATION SPRINGFIELD - 3265 S. NATIONAL AVE, SUITE 200 - SPRINGFIELD, MO 65807	32-0195818	501(C)(3)	5,500.	0.			HEALTH INCENTIVE AWARDS
MERCY HOME FOR BOYS AND GIRLS 1140 WEST JACKSON BLVD CHICAGO, IL 60607	36-2171726	501(C)(3)	5,000.	0.			HUMAN SERVICES
MIAMI PUBLIC SCHOOLS ENRICHMENT FOUNDATION - 26 N. MAIN ST. - MIAMI, OK 74354	73-1316520	501(C)(3)	5,000.	0.			UNRESTRICTED

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MIDWEST FOSTER CARE ADOPTION ASSOCIATION 43-1895965 - 18600 E 37TH TERRACE BOX 11 - INDEPENDENCE, MO 64057	43-1895965	501(C)(3)	16,639.	0.			HUMAN SERVICES
MIRACLE OF NAZARETH INTERNATIONAL FOUNDATION - 550 UNION STREET - MISHAWAKA, IN 46544	35-2046656	501(C)(3)	5,000.	0.			UNRESTRICTED
MISSOURI CAVES AND KARST CONSERVANCY - PO BOX 190456 - WEBSTER GROVES, MO 63119	43-1642748	501(C)(3)	7,000.	0.			SINKHOLE/WATERSHED CLEANUP SUPPLIES
MISSOURI COLLEGES FUND, INC. 3401 W. TRUMAN BLVD. STE. 202 JEFFERSON CITY, MO 65109	43-0680952	501(C)(3)	13,650.	0.			UNRESTRICTED
MISSOURI LIONS EYE RESEARCH FOUNDATION - 3506 SOUTH CULPEPPER CIRCLE SUITE D & F - SPRINGFIELD, MO 65804	43-1036995	501(C)(3)	6,358.	0.			OPERATIONS AND HEALTH SERVICES RELATED TO SCREENINGS
MISSOURI SOUTHERN FOUNDATION 3950 E. NEWMAN ROAD JOPLIN, MO 64801	43-0907114	501(C)(3)	1,000.	0.			INTERNATIONAL STUDIES PROGRAM
MISSOURI SOUTHERN FOUNDATION 3950 E. NEWMAN ROAD JOPLIN, MO 64801	43-0907114	501(C)(3)	1,000.	0.			FOREIGN STUDY PROGRAMMING
MISSOURI SOUTHERN FOUNDATION 3950 E. NEWMAN ROAD JOPLIN, MO 64801	43-0907114	501(C)(3)	11,000.	0.			EDUCATIONAL PROGRAMMING
MISSOURI SPORTS HALL OF FAME 3861 E STAN MUSIAL DR SPRINGFIELD, MO 65809	43-1624519	501(C)(3)	10,000.	0.			COMMUNITY BETTERMENT

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MISSOURI STATE UNIVERSITY 901 S NATIONAL SPRINGFIELD, MO 65897	44-6000308	501(C)(3)	39,400.	0.			EDUCATIONAL PROGRAMMING
MITCHELL PREHISTORIC INDIAN VILLAGE PRESERVATION SOCIETY - P.O. BOX 621 - MITCHELL, SD 57301	46-0345946	501(C)(3)	5,000.	0.			COMMUNITY BETTERMENT
MONETT AREA YMCA 115 S LINCOLN AVE MONETT, MO 65708	44-0545283	501(C)(3)	15,625.	0.			EDUCATIONAL OPPORTUNITIES FOR YOUTH
MORRISVILLE CEMETERY ASSOCIATION 1043 HWY 215 MORRISVILLE, MO 65710	44-0667307	501(C)(3)	9,464.	0.			SUPPORT THE SPECIFIED PUBLIC NEEDS AND HISTORIC PRESERVATION OF THE CEMETERY
MSU - WEST PLAINS CAMPUS 128 GARFIELD WEST PLAINS, MO 65775	43-1641443	501(C)(3)	12,357.	0.			TO ASSIST DESERVING YOUNG STUDENTS
MSU FOUNDATION 300 S. JEFFERSON, STE. 100 SPRINGFIELD, MO 65806	43-1234200	501(C)(3)	76,000.	0.			EDUCATIONAL PROGRAMMING
MT. VERNON SCHOOLS 730 S. LANDRUM MT. VERNON, MO 65712	44-6003597	501(C)(3)	62,661.	0.			SCHOLARSHIPS AND TEACHER AWARDS
NATIONAL INSTITUTE OF MARRIAGE 2175 SUNSET INN ROAD BRANSON, MO 65616	86-0418475	501(C)(3)	250,000.	0.			UNRESTRICTED
NEW CREATION CHURCH 1831 S. CONNOR AVE. JOPLIN, MO 64804	26-1986233	501(C)(3)	26,000.	0.			THE JOPLIN PROMISE

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NEWBORNS IN NEED 712 WEST SUNSHINE SPRINGFIELD, MO 65807	43-1808983	501(C)(3)	15,000.	0.			SUPPLIES FOR LOW INCOME NEWBORNS
NIXA R-II SCHOOL DISTRICT FAUGHT ADMINISTRATIVE CENTER NIXA, MO 65714	44-6003678	501(C)(3)	19,005.	0.			EDUCATIONAL PROGRAMS
NONPROFIT SERVICES CENTER 8764 MANCHESTER ROAD SUITE 203 ST LOUIS, MO 63144	43-1752694	501(C)(3)	6,294.	0.			DIASTER PREPARENESS PROGRAM
OLD RUGGED CROSS FOUNDATION P.O. BOX 41 NILES, MI 49120	38-3450148	501(C)(3)	15,000.	0.			UNRESTRICTED
OPTIONS PREGNANCY CLINIC 192 EXPRESSWAY LANE, STE. A BRANSON, MO 65616	43-1642900	501(C)(3)	6,428.	0.			PREGNANCY EDUCATION PROGRAM
OREGON COUNTY SOIL AND WATER CONSERVATION DISTRICT - RT. 73, BOX 3532 - ALTON, MO 65606	43-0998759	501(C)(3)	5,000.	0.			EDUCATIONAL PROGRAMS ON WATERCREEK WATERSHED
OTC FOUNDATION 1001 E CHESTNUT EXPY SPRINGFIELD, MO 65802	43-1753974	501(C)(3)	63,165.	0.			EDUCATIONAL PROGRAMS
OZARK COIN CLUB P.O. BOX 3913 SPRINGFIELD, MO 65808	45-3155292	501(C)(3)	23,700.	0.			YOUTH PROGRAMMING
OZARK GREENWAYS PO BOX 50733 SPRINGFIELD, MO 65805	43-1525122	501(C)(3)	7,000.	0.			UNRESTRICTED

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OZARK MOUNTAIN FAMILY YMCA 175 INDUSTRIAL PARK DRIVE, SUITE A HOLLISTER, MO 65672	44-0545283	501(C)(3)	30,000.	0.			UNRESTRICTED
OZARK MOUNTAIN LEGACY PO BOX 7070 BRANSON, MO 65615	74-3113276	501(C)(3)	5,983.	0.			RECYCLING PROJECT
OZARK REGIONAL LAND TRUST PO BOX 440007 ST LOUIS, MO 63144	43-1304715	501(C)(3)	16,868.	0.			NINESTONE AREA
OZARK TRAILS COUNCIL, BSA 1616 S EASTGATE SPRINGFIELD, MO 65809	44-0546294	501(C)(3)	16,000.	0.			UNRESTRICTED
OZARKS FAMILY YMCA 1 YMCA DRIVE MOUNTAIN GROVE, MO 65711	43-1617662	501(C)(3)	42,382.	0.			UNRESTRICTED
OZARKS FOOD HARVEST PO BOX 5746 SPRINGFIELD, MO 65801	43-1426384	501(C)(3)	48,151.	0.			FOOD FOR HUNGER FAMILIES IN THE OZARKS
OZARKS MEDICAL CENTER FOUNDATION CAPACITY BUILDING FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	15,000.	0.			UNRESTRICTED
OZARKS MEDICAL CENTER FOUNDATION P.O. BOX 1100 WEST PLAINS, MO 65775	43-1834356	501(C)(3)	1,500.	0.			HEALTH SERVICES
OZARKS MEDICAL CENTER FOUNDATION P.O. BOX 1100 WEST PLAINS, MO 65775	43-1834356	501(C)(3)	10,000.	0.			EMERGENCY ROOM DEPARTMENT

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OZARKS REGIONAL YMCA 417 S JEFFERSON SPRINGFIELD, MO 65806	44-0545283	501(C)(3)	3,000.	0.			STRONG KIDS CAMPAIGN/SCHOLARSHIPS
OZARKS REGIONAL YMCA 417 S JEFFERSON SPRINGFIELD, MO 65806	44-0545283	501(C)(3)	2,000.	0.			CAMP WAKONDA
OZARKS REGIONAL YMCA 417 S JEFFERSON SPRINGFIELD, MO 65806	44-0545283	501(C)(3)	1,000.	0.			PAT JONES CAPITAL CAMPAIGN - YEAR 5 OF 5
OZARKS TEEN CHALLENGE BOX 2066 BRANSON WEST, MO 65737	59-2479228	501(C)(3)	10,000.	0.			BOYS PROGRAM IN BRANSON WEST
OZARKS WATER WATCH: UPPER WHITE RIVER BASIN FOUNDATION - P.O. BOX 636 - KIMBERLING CITY, MO 65686	43-1942991	501(C)(3)	6,500.	0.			UNRESTRICTED
OZORA COMMUNITY FIRE PROTECTION ASSOCIATION - 17919 STATE ROUTE N - ST. MARY, MO 63673	43-1254072	501(C)(3)	7,735.	0.			EMERGENCY RESPONSE EQUIPMENT
PATRIOT FAMILY SCHOLARSHIP FUND 425 E. TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	25,000.	0.			FOR EDUCATIONAL NEEDS
PAUL G. NAHON, III, ATHLETIC SCHOLARSHIP FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,250.	0.			EDUCATIONAL PROGRAM
PAWNEE COUNTY WORKSHOP PO BOX 63 CLEVELAND, OK 74020	73-1216618	501(C)(3)	51,500.	0.			EDUCATIONAL PROJECTS & REHAB FOR DISADVANTAGED KIDS

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PHI DELTA THETA FOUNDATION 2 SOUTH CAMPUS AVENUE OXFORD, OH 45056	34-6539803	501(C)(3)	10,000.	0.			FOR THE HOUSING FUND
PLACEWORKS PROJECT FUND 425 E. TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	32,500.	0.			ARTS PROGRAMMING
PRAYER MOUNTAIN OF THE OZARKS PO BOX 40 BRANSON, MO 65615	73-1109099	501(C)(3)	5,000.	0.			UNRESTRICTED
PREGNANCY CARE CENTER METRO SGF CHALLENGE GRANT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			UNRESTRICTED
PREGNANCY CARE CENTER 1342 E PRIMROSE STE C SPRINGFIELD, MO 65804	43-1786978	501(C)(3)	26,898.	0.			UNRESTRICTED
PRIMROSE PLACE 3850 S. NATIONAL STE. 500 SPRINGFIELD, MO 65807	43-1183783	501(C)(3)	44,648.	0.			ALZHEIMER'S PATIENTS
PULASKI COUNTY COAD 20876 HAMPTON DRIVE DIXON, MO 65459	51-0200411	501(C)(3)	7,806.	0.			COMMUNITY BETTERMENT
RAILROAD HISTORICAL MUSEUM, INC. 1400 NORTH GRANT SPRINGFIELD, MO 65802	43-1418728	501(C)(3)	10,000.	0.			UNRESTRICTED
RAZORBACK FOUNDATION 1295 S. RAZORBACK RD. FAYETTEVILLE, AR 72701	71-0540644	501(C)(3)	10,000.	0.			UNRESTRICTED

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REBUILD JOPLIN FUND 425 E. TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	102,845.	0.			HUMAN SERVICES
REBUILD JOPLIN 705 ILLINOIS AVE., STE. 1 JOPLIN, MO 64801	26-2189665	501(C)(3)	298,065.	0.			EMERGENCY HOUSING NEEDS
REPUBLIC R-III SCHOOLS OFFICE OF THE SUPERINTENDENT REPUBLIC, MO 65738	44-6004149	501(C)(3)	1,000.	0.			ELEMENTARY LITERACY COACH PROGRAM
REPUBLIC R-III SCHOOLS OFFICE OF THE SUPERINTENDENT REPUBLIC, MO 65738	44-6004149	501(C)(3)	645.	0.			MUSIC EDUCATION PROGRAMS
REPUBLIC R-III SCHOOLS OFFICE OF THE SUPERINTENDENT REPUBLIC, MO 65738	44-6004149	501(C)(3)	1,945.	0.			MIDDLE SCHOOL ROBOTICS EDUCATION
REPUBLIC R-III SCHOOLS OFFICE OF THE SUPERINTENDENT REPUBLIC, MO 65738	44-6004149	501(C)(3)	1,750.	0.			HIGH SCHOOL SCIENCE EDUCATION PROGRAM
REPUBLIC R-III SCHOOLS OFFICE OF THE SUPERINTENDENT REPUBLIC, MO 65738	44-6004149	501(C)(3)	26,000.	0.			HEALTH.HUNGER.HYGIENE AID FOR AT RISK SCHOOL CHILDREN
RONALD MCDONALD HOUSE TOOTH TRUCK METRO SGF CHALLENGE GRANT FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES
RONALD MCDONALD HOUSE 949 E PRIMROSE ST SPRINGFIELD, MO 65807	43-1371143	501(C)(3)	56,353.	0.			SUPPORT FOR THE HEALTH AND WELL-BEING OF CHILDREN IN THE OZARKS

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ROTARACT CLUB OF SPRINGFIELD FUND 425 EAST TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,500.	0.			UNRESTRICTED
ROTARY FOUNDATION ONE ROTARY CENTER EVANSTON, IL 60201	36-3245072	501(C)(3)	7,500.	0.			HUMAN SERVICES
RUTH E. CARTER CHARITABLE FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	155,925.	0.			FOR THE HOMELESS AND RELIGIOUS EDUCATION
SAFE AND SOBER INC. 3331 EAST RIDGEVIEW STREET SPRINGFIELD, MO 65804	46-3408060	501(C)(3)	6,500.	0.			2014 SAFE AND SOBER CAMPAIGN
SAINT PAUL UNITED METHODIST CHURCH ENDOWMENT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,500.	0.			UNRESTRICTED
SALEM AREA COMMUNITY BETTERMENT ASSOC, INC. - PO BOX 732 - SALEM, MO 65560	43-1677891	501(C)(3)	15,000.	0.			\$5,000 GENERAL FUND \$10,000 OZARK NATURAL RESOURCE CENTER
SALEM PUBLIC LIBRARY 102 N. JACKSON SALEM, MO 65560	04-3690774	501(C)(3)	10,000.	0.			UNRESTRICTED
SALVATION ARMY - COFFEYVILLE, KANSAS - PO BOX 514 - COFFEYVILLE, KS 67337	13-5562351	501(C)(3)	5,747.	0.			PURCHASE FOOD AND TOYS FOR NEEDY CHILDREN
SALVATION ARMY - DENT COUNTY PO BOX 229 SALEM, MO 65560	43-0653584	501(C)(3)	10,000.	0.			SALEM UNIT KETTLE CAMPAIGN

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY -- ST. LOUIS OFFICE 1130 HAMPTON AVE. ST. LOUIS, MO 63139	36-2167910	501(C)(3)	6,053.	0.			UNRESTRICTED
SALVATION ARMY OF SPRINGFIELD, MO P.O. BOX 9685 SPRINGFIELD, MO 65801	58-0660607	501(C)(3)	16,054.	0.			UNRESTRICTED
SAN FRANCISCO BICYCLE COALITION EDUCATION FUND - 833 MARKET STREET, 10TH FLOOR - SAN FRANCISCO, CA 94103	20-5182730	501(C)(3)	7,500.	0.			UNRESTRICTED
SEMO REGIONAL PLANNING & DEVELOPMENT COMMISSION - P.O. BOX 366 - PERRYVILLE, MO 63775	43-0958405	501(C)(3)	230,000.	0.			UNRESTRICTED
SHAE RUARK MEMORIAL ENDOWMENT FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	50,000.	0.			UNRESTRICTED
SHARE IT FORWARD 399 SILVER DOLLAR CITY RAILROAD BRANSON, MO 65616	20-1582086	501(C)(3)	65,000.	0.			UNRESTRICTED
SKAGGS FOUNDATION PO BOX 650 BRANSON, MO 65615	30-0107007	501(C)(3)	10,000.	0.			EDUCATIONAL NEEDS/AS REQUESTED
SKYLINE R-II SCHOOL DISTRICT RT 2 BOX 486 NORWOOD, MO 65717	44-6006160	501(C)(3)	6,933.	0.			EDUCATIONAL PROGRAM
SMITH-GLYNN-CALLAWAY FNDTN. SCHLSHP FUND IN HONOR OF DR. PETERSON - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	15,005.	0.			SCHOLARSHIPS

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SOUTH CENTRAL FCA 206 NORTH MAPLE BLUE EYE, MO 65611	44-0610626	501(C)(3)	60,000.	0.			UNRESTRICTED
SOUTHWEST BAPTIST UNIVERSITY 1601 S SPRINGFIELD BOLIVAR, MO 65613	44-0567385	501(C)(3)	4,000.	0.			MABEE CHAPEL RENOVATION
SOUTHWEST BAPTIST UNIVERSITY 1601 S SPRINGFIELD BOLIVAR, MO 65613	44-0567385	501(C)(3)	12,000.	0.			PRE-MED SCHOLARSHIPS
SOUTHWEST BAPTIST UNIVERSITY 1601 S SPRINGFIELD BOLIVAR, MO 65613	44-0567385	501(C)(3)	2,018.	0.			UNRESTRICTED
SOUTHWEST CENTER FOR INDEPENDENT LIVING - 2864 S NETTLETON AVE - SPRINGFIELD, MO 65807	43-1383616	501(C)(3)	5,000.	0.			RESILIENT COMMUNITY DISASTER PREPAREDNESS
SPRINGFIELD BUSINESS & DEVELOPMENT CORPORATION - PO BOX 1687 - SPRINGFIELD, MO 65801	43-1309497	501(C)(3)	5,000.	0.			ANNUAL SUPPORT
SPRINGFIELD CATHOLIC HIGH SCHOOL 2340 S. EASTGATE SPRINGFIELD, MO 65809	44-0619146	501(C)(3)	5,000.	0.			CAPITAL CAMPAIGN
SPRINGFIELD CATHOLIC HIGH SCHOOL 2340 S. EASTGATE SPRINGFIELD, MO 65809	44-0619146	501(C)(3)	5,000.	0.			GREENHOUSE PROGRAM
SPRINGFIELD CATHOLIC SCHOOLS 2340 S EASTGATE AVE SPRINGFIELD, MO 65809	44-0619146	501(C)(3)	13,826.	0.			EDUCATIONAL PROGRAMMING

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SPRINGFIELD LITTLE THEATRE 311 E WALNUT SPRINGFIELD, MO 65806	43-0893064	501(C)(3)	67,000.	0.			UNRESTRICTED
SPRINGFIELD PUBLIC SCHOOLS NUTRITION SERVICES - 3002 WEST KILDEE LANE - SPRINGFIELD, MO 65810	44-6005539	501(C)(3)	28,296.	0.			SNACK MILK & NUTRITIONAL PROGRAM FOR LOW INCOME STUDENTS
SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS SPRINGFIELD, MO 65802	44-6005539	501(C)(3)	4,039.	0.			STUDENT TRANSPORTATION COSTS FOR FIELD EXPERIENCE AT MSU
SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS SPRINGFIELD, MO 65802	44-6005539	501(C)(3)	8,662.	0.			MATERIALS PURCHASE FOR TITLE I SCHOOL CHILDREN FOR "MY STUDIO TO GO"
SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS SPRINGFIELD, MO 65802	44-6005539	501(C)(3)	1,338.	0.			PAYMENT FOR HEAD LICE TREATMENT
SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS SPRINGFIELD, MO 65802	44-6005539	501(C)(3)	500.	0.			STUDY ALTERNATIVE SCHOOL FOOD PANTRY
SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS SPRINGFIELD, MO 65802	44-6005539	501(C)(3)	456.	0.			HEARING AID BATTERY KITS FOR R-12 SCHOOL STUDENTS
SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS SPRINGFIELD, MO 65802	44-6005539	501(C)(3)	23,639.	0.			HEALTH.HUNGER.HYGIENE AID FOR AT RISK SCHOOL CHILDREN
SPRINGFIELD SYMPHONY ORCHESTRA 411 N SHERMAN PKWY SPRINGFIELD, MO 65802	43-0797224	501(C)(3)	14,719.	0.			UNRESTRICTED

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SPRINGFIELD TREE CITY USA FUND 425 E TRAFFICWAY SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,000.	0.			COMMUNITY BETTERMENT
SPRINGFIELD-GREENE COUNTY LIBRARY FOUNDATION FUND - 425 E. TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	61,080.	0.			EDUCATIONAL PROGRAMMING
SPRINGFIELD-GREENE COUNTY LIBRARY PO BOX 760 SPRINGFIELD, MO 65801	05-0534215	501(C)(3)	400.	0.			CATERING FOR FOOD FOR THOUGHT PROGRAM
SPRINGFIELD-GREENE COUNTY LIBRARY PO BOX 760 SPRINGFIELD, MO 65801	05-0534215	501(C)(3)	633.	0.			OPERATIONAL SUPPORT TO PURCHASE CHILDREN'S READING MATERIALS
SPRINGFIELD-GREENE COUNTY LIBRARY PO BOX 760 SPRINGFIELD, MO 65801	05-0534215	501(C)(3)	807.	0.			ANNUAL DISTRIBUTION
SPRINGFIELD-GREENE COUNTY LIBRARY PO BOX 760 SPRINGFIELD, MO 65801	05-0534215	501(C)(3)	5,786.	0.			FUNDING FOR FICTION BOOKS
SPRINGFIELD-GREENE COUNTY LIBRARY PO BOX 760 SPRINGFIELD, MO 65801	05-0534215	501(C)(3)	500.	0.			DIGITAL PROJECT
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLS - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	25,000.	0.			SPRINGFIELD LASERS - TENNIS PROGRAM
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLS - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	1,200.	0.			YOUTH SCHOLARSHIPS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLER - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	150.	0.			RIVERCUT GOLF COURSE TOURNAMENT
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLER - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	1,551.	0.			BALDWIN MEMORIAL GARDEN
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLER - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	203,295.	0.			PLAYGROUND EQUIPMENT
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLER - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	59.	0.			PURCHASE OF LANDSCAPE PLANTS FOR PARKING LOT ENTRANCE
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLER - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	8,275.	0.			EDUCATIONAL PROGRAM
SPRINGFIELD-GREENE COUNTY PARK BOARD - 1923 N WELLER - SPRINGFIELD, MO 65803	44-6000268	501(C)(3)	50,000.	0.			UNRESTRICTED
ST. ANN'S CATHOLIC CHURCH PO BOX 803 CARTHAGE, MO 64836	44-0653009	501(C)(3)	14,000.	0.			UNRESTRICTED
ST. JOHN THE EVANGELIST SCHOOL 111 NEW BALCH STREET BEVERLY, MA 01915	52-0591425	501(C)(3)	5,000.	0.			EDUCATION PROGRAM
ST. JOHN'S COLLEGE OF NURSING & HEALTH SCIENCES OF SBU - 4431 S. FREMONT - SPRINGFIELD, MO 65804	32-0195818	501(C)(3)	10,000.	0.			NURSING SCHOLARSHIPS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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ST. JUDE CHILDREN'S RESEARCH HOSPITAL - ATTN: ESTATE COORDINATOR - MEMPHIS, TN 38105	62-0646012	501(C)(3)	8,464.	0.			UNRESTRICTED
ST. MARY'S CATHOLIC CHURCH PO BOX 106 JOPLIN, MO 64802	44-0596717	501(C)(3)	300,000.	0.			FAITH BASED PROGRAMS
ST. PATRICK'S CATHOLIC CHURCH 638 WEST D AVENUE KINGMAN, KS 67068	48-0543796	501(C)(3)	7,842.	0.			CHURCH AND SCHOOL'S GENERAL ACTIVITIES IN MEMORIAL TO PATRICIA AND HER FATHER, JOHN F.
ST. PATRICK'S CHURCH 17 SAINT PATRICK'S LANE ROLLA, MO 65401	43-0653548	501(C)(3)	7,505.	0.			UNRESTRICTED
STAINED GLASS THEATRE JOPLIN PO BOX 3862 JOPLIN, MO 64803	20-1737180	501(C)(3)	75,000.	0.			ARTS AND CULTURE PROGRAM FOR THEATRE
STE. GENEVIEVE AREA CENTER FOR LIFE - PO BOX 375 - STE GENEVIEVE, MO 63670	61-1680486	501(C)(3)	6,593.	0.			HEALTH EDUCATION MATERIALS
STE. GENEVIEVE CO. SHELTERED WORKSHOP - 10929 INDUSTRIAL DRIVE - STE GENEVIEVE, MO 63670	51-0200666	501(C)(3)	15,000.	0.			HUMAN SERVICE PROJECT
STE. GENEVIEVE COMMUNITY SERVICES FORUM - PO BOX 248 - STE GENEVIEVE, MO 63670	43-1656059	501(C)(3)	29,428.	0.			COMMUNITY BETTERMENT
STE. GENEVIEVE COUNTY BOARD FOR THE DEVELOPMENTALLY DISABLED - 21530 HWY 32, SUITE B - STE GENEVIEVE, MO 63670	26-3730352	501(C)(3)	10,000.	0.			HUMAN SERVICE PROJECT

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STE. GENEVIEVE COUNTY COMMUNITY FOUNDATION SCHOLARSHIP FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	16,000.	0.			2013-14 SCHOLARSHIPS
STE. GENEVIEVE COUNTY NUTRITION CENTER - 727 PARKWOOD DRIVE - STE. GENEVIEVE, MO 63670	52-1072753	501(C)(3)	10,000.	0.			HEALTH PROGRAMS
STE. GENEVIEVE LIONS CHARITABLE FOUNDATION - PO BOX 9 - STE GENEVIEVE, MO 63670	45-1421875	501(C)(3)	8,466.	0.			PARK IMPROVEMENTS, TENTS, TABLES
STE. GENEVIEVE PARISH ST. VINCENT DE PAUL SOCIETY - 49 DUBOURG PLACE - STE. GENEVIEVE, MO 63670	43-0653472	501(C)(3)	21,000.	0.			FOOD PANTRY PROGRAM
STE. GENEVIEVE SHERIFF'S DEPARTMENT - 5 BASLER DR - STE. GENEVIEVE, MO 63670	43-6003165	501(C)(3)	26,379.	0.			COMMUNITY SAFETY PROGRAM
STEAMBOAT SPRINGS WINTER SPORTS CLUB FOUNDATION - PO BOX 774487 - STEAMBOAT SPRINGS, CO 80477	74-2254732	501(C)(3)	5,000.	0.			UNRESTRICTED
STOCKTON AREA MINISTERIAL ALLIANCE PO BOX 171 STOCKTON, MO 65785	20-1957662	501(C)(3)	14,100.	0.			HUMAN SERVICES
STOCKTON UNITED METHODIST CHURCH PO BOX 329 STOCKTON, MO 65785	12-5928620	501(C)(3)	1,070.	0.			HUMAN SERVICES
STOCKTON UNITED METHODIST CHURCH PO BOX 329 STOCKTON, MO 65785	12-5928620	501(C)(3)	8,000.	0.			BACKPACK PROGRAM FOR CHILDREN

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TABERNACLE OF PRAISE MINISTRIES 256 CHURCH ROAD BRANSON, MO 65616	65-1033141	501(C)(3)	10,000.	0.			HUMAN SERVICES - AREA OF GREATEST NEED
TEAM HEART, INC. P.O. BOX 70 NEWTON, MA 02468	27-1435443	501(C)(3)	5,000.	0.			IN HONOR OF MARK SGANTAS
THAYER R-II PUBLIC SCHOOLS 401 E WALNUT ST THAYER, MO 65791	43-6004425	501(C)(3)	9,000.	0.			GOOD SAMARITAN SCHOLARSHIP
THAYER R-II PUBLIC SCHOOLS 401 E WALNUT ST THAYER, MO 65791	43-6004425	501(C)(3)	272.	0.			EDUCATIONAL PROGRAM
THE ASSOCIATION FOR THE BLIND 1452 EAST PORTLAND ST SPRINGFIELD, MO 65804	80-0280486	501(C)(3)	10,328.	0.			FOR THE BLIND OR PERSONS WHO HAVE PROGRESSIVE EYE DISEASE OR FAILURE
THE CARING PEOPLE 164 CORPORATE PLACE BRANSON, MO 65616	43-1748286	501(C)(3)	103,500.	0.			UNRESTRICTED
THE CHILD ADVOCACY CENTER 1033 E WALNUT ST SPRINGFIELD, MO 65806	43-1729079	501(C)(3)	160,540.	0.			SERVICES FOR CHILDREN
THE CHURCH OF OSAGE HILLS 5237 HIGHWAY 54 OSAGE, MO 65065	43-1493454	501(C)(3)	5,000.	0.			UNRESTRICTED
THE CURATORS OF THE UNIVERSITY OF MISSOURI - UNIVERSITY OF MISSOURI - COLUMBIA, MO 65211	43-6003859	501(C)(3)	12,500.	0.			COMMUNITY BETTERMENT

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THE FOUNDATION: THE COUNCIL OF CHURCHES OF THE OZARKS - 3000 E CHESTNUT EXPWY, STE A - SPRINGFIELD, MO 65802	43-1819544	501(C)(3)	23,090.	0.			UNRESTRICTED
THE KITCHEN CLINIC 1630 N. JEFFERSON SPRINGFIELD, MO 65803	43-1384531	501(C)(3)	5,000.	0.			TO SERVE THE NEEDS OF THE HOMELESS
THE KITCHEN FOUNDATION SPRINGFIELD FIRST COMMUNITY BANK SPRINGFIELD, MO 65804	43-1747868	501(C)(3)	9,326.	0.			UNRESTRICTED
THE KITCHEN 1630 N JEFFERSON AVE SPRINGFIELD, MO 65803	43-1384531	501(C)(3)	190,113.	0.			SERVICES FOR THE HOMELESS
THE SMILE TRAIN 28TH FLOOR NEW YORK, NY 10010	13-3661416	501(C)(3)	10,000.	0.			UNRESTRICTED
THE VICTIM CENTER METRO SGF CHALLENGE GRANT FUND - 425 E. TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES
THOMAS & KIMBERLY PRATER FAMILY FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	15,873.	0.			UNRESTRICTED
TORCHBEARER FOUNDATION PO BOX 6674 BRANSON, MO 65615	47-0847030	501(C)(3)	13,200.	0.			UNRESTRICTED
TRI-COUNTY PREGNANCY CARE CENTER 315 SOUTH MADISON AVENUE AURORA, MO 65605	30-0645046	501(C)(3)	10,000.	0.			HELP FOR UNPLANNED PREGNANCIES

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UNITED METHODIST CHURCH OF SALEM, MISSOURI - 801 EAST SCENIC RIVERS BLVD. - SALEM, MO 65560	43-0731516	501(C)(3)	32,500.	0.			FAITH BASED PROGRAMS
UNITED MINISTRIES IN HIGHER EDUCATION - 1330 EAST CHERRY STREET SUITE L10 - SPRINGFIELD, MO 65802	51-0155226	501(C)(3)	15,152.	0.			UNRESTRICTED
UNITED WAY METRO SGF CHALLENGE GRANT FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	8,214.	0.			HUMAN SERVICES
UNITED WAY OF SOUTHWEST MISSOURI 3510 E 3RD ST JOPLIN, MO 64801	44-0556865	501(C)(3)	43,270.	0.			BOARD AND STAFF TRAINING PROGRAM
UNIVERSITY CHILD CARE CENTER 500 SOUTH AVENUE SPRINGFIELD, MO 65806	43-1185103	501(C)(3)	3,913.	0.			EDUCATIONAL PROGRAMMING- COMPUTER EQUIPMENT AND SUPPORTING MATERIALS
UNIVERSITY CHILD CARE CENTER 500 SOUTH AVENUE SPRINGFIELD, MO 65806	43-1185103	501(C)(3)	2,925.	0.			HIGH QUALITY CHILD-CARE FOR NEEDY PRESCHOOL CHILDREN
UPPER WHITE RIVER BASIN FOUNDATION CAPACITY BUILDING FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	121,099.	0.			COMMUNITY BETTERMENT
VALLE SCHOOLS STE. GENEVIEVE PARRISH CENTER STE. GENEVIEVE, MO 63670	43-0653472	501(C)(3)	52,144.	0.			FOR EDUCATIONAL PURPOSES
VENUES CHURCH P.O. BOX 14097 SPRINGFIELD, MO 65814	46-1740911	501(C)(3)	110,000.	0.			UNRESTRICTED

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VICTORY MINISTRY AND SPORTS COMPLEX FUND - 425 EAST TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,000.	0.			HUMAN SERVICES
VICTORY MISSION PO BOX 2884 SPRINGFIELD, MO 65801	43-1345089	501(C)(3)	31,401.	0.			UNRESTRICTED
VITAE CARING FOUNDATION PO BOX 791 JEFFERSON CITY, MO 65102	43-1138252	501(C)(3)	10,000.	0.			HUMAN SERVICES
WASHINGTON AVENUE BAPTIST CHURCH 1722 N NATIONAL AVE SPRINGFIELD, MO 65803	75-3261641	501(C)(3)	21,804.	0.			FOR REPAIRS AND MAINTENANCE OF CHURCH
WATERED GARDENS 531 KENTUCKY AVE JOPLIN, MO 64801	20-2586821	501(C)(3)	37,150.	0.			UNRESTRICTED
WCCA TV 415 MAIN STREET WORCESTER, MA 01608	04-2984716	501(C)(3)	42,100.	0.			EDUCATIONAL FILM PROJECT
WEINGARTEN VOLUNTEER FIRE DEPARTMENT - 13491 HWY 32 - STE. GENEVIEVE, MO 63670	43-1326479	501(C)(3)	8,000.	0.			SAFETY EQUIPMENT
WESLEY UNITED METHODIST CHURCH 922 W REPUBLIC RD SPRINGFIELD, MO 65807	43-6067877	501(C)(3)	10,556.	0.			UNRESTRICTED
WEST PLAINS CHRISTIAN CLINIC 1115 ALASKA STREET, PO BOX 988 WEST PLAINS, MO 65775	27-1307333	501(C)(3)	11,000.	0.			HEALTH ASSISTANCE FOR LOW INCOME FAMILIES

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WESTPHALIA KNIGHTS OF COLUMBUS P.O. BOX 132 WESTPHALIA, MO 65085	23-7196346	501(C)(8)	6,588.	0.			SOCCER PROGRAM
WESTVILLE HIGH SCHOOL SCHOLARSHIP FUND - WESTVILLE HIGH SCHOOL - WESTVILLE, OK 74965	73-1078340	501 (C)(3)	6,000.	0.			SCHOLARSHIP
WHITE RIVER VALLEY HISTORICAL SOCIETY - PO BOX 84145 - FORSYTH, MO 65653	43-1650276	501(C)(3)	6,000.	0.			UNRESTRICTED
WHOLE KIDS OUTREACH 62143 HWY 21 ELLINGTON, MO 63638	43-1839370	501(C)(3)	20,000.	0.			HEALTH/DEVELOPMENT NEEDS OF FAMILIES
WILDCAT GLADES CONSERVATION & AUDUBON CENTER - 201 W RIVIERA RD STE A - JOPLIN, MO 64804	13-1624102	501(C)(3)	10,030.	0.			RESILIENT COMMUNITY GRANT PROGRAM
WILLARD CHILDREN'S CHARITABLE FOUNDATION SCHOLARSHIP FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	5,920.	0.			EDUCATIONAL PROGRAMS
WILLARD CHILDREN'S HEALTH AND DENTAL FUND - 425 E TRAFFICWAY - SPRINGFIELD, MO 65806	23-7290968	501(C)(3)	10,860.	0.			HEALTH SERVICES
WILLARD R-II SCHOOL DISTRICT 460 E KIME ST WILLARD, MO 65781	44-6004826	501(C)(3)	386.	0.			ART EDUCATIONAL PROGRAMMING
WILLARD R-II SCHOOL DISTRICT 460 E KIME ST WILLARD, MO 65781	44-6004826	501(C)(3)	300.	0.			PROGRAM FOR SPECIAL NEEDS CHILDREN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILLARD R-II SCHOOL DISTRICT 460 E KIME ST WILLARD, MO 65781	44-6004826	501(C)(3)	521.	0.			INTERMEDIATE SCHOOL EDUCATION PROGRAM
WILLARD R-II SCHOOL DISTRICT 460 E KIME ST WILLARD, MO 65781	44-6004826	501(C)(3)	6,000.	0.			CHILDREN DENTAL NEEDS
WILLARD R-II SCHOOL DISTRICT 460 E KIME ST WILLARD, MO 65781	44-6004826	501(C)(3)	6,705.	0.			EDUCATIONAL PROGRAM
WILLOW SPRINGS ARTS COUNCIL 979 HWY HH WILLOW SPRINGS, MO 65793	43-1481989	501(C)(3)	7,700.	0.			COMMUNITY ARTS PROGRAMMING
WILLOW SPRINGS CF PO BOX 345 WILLOW SPRINGS, MO 65793	43-1622500	501(C)(3)	24,982.	0.			COMMUNITY BETTERMENT PROJECT
WILLOW SPRINGS PUBLIC SCHOOLS 215 W FOURTH ST WILLOW SPRINGS, MO 65793	44-6004841	501(C)(3)	7,098.	0.			EDUCATIONAL PROGRAM
WINGS OF HOPE 18370 WINGS OF HOPE BLVD ST. LOUIS, MO 63005	43-0909606	501(C)(3)	10,000.	0.			HUMAN SERVICES
WOMAN 2 WOMAN 1026 MAIN STREET OSAGE BEACH, MO 65065	43-1886013	501(C)(3)	12,500.	0.			UNRESTRICTED
WOMEN IN NEED PO BOX 455 OZARK, MO 65721	16-1662132	501(C)(3)	5,500.	0.			EDUCATION AND COUNSEL FOR WOMEN

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WRIGHT COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY - PO BOX 513 - HARTVILLE, MO 65667	43-1664509	501(C)(3)	14,355.	0.			SCHOLARSHIPS
WYCLIFFE BIBLE TRANSLATORS PO BOX 628200 ORLANDO, FL 32862-8200	95-1831097	501(C)(3)	15,960.	0.			MISSIONARY FUNDING
YOUNG LIFE - MISSOURI SMALL TOWNS P.O. BOX 1366 OZARK, MO 65721	84-0385934	501(C)(3)	40,000.	0.			UNRESTRICTED
YOUNG LIFE - ROGERSVILLE PO BOX 1366 OZARK, MO 65721	84-0385934	501(C)(3)	100,000.	0.			SHOW-ME EVERY KID
ZELL AREA JAYCEES 11266 STATE HWY A STE GENEVIEVE, MO 63670	43-1097743	501(C)(3)	7,500.	0.			ASSISTING ADA PROJECTS

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ARTS, CULTURE	4	400.	0.		
COMMUNITY BETTERMENT	1861	545,894.	0.		
EDUCATIONAL	648	1,037,420.	0.		
ENVIRONMENT	1252	277,921.	0.		
FAITH BASED	2	10,200.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: COUNCIL OF CHURCHES OF THE OZARKS

(H) PURPOSE OF GRANT OR ASSISTANCE: EDUCATIONAL PROGRAMMING-STAFF AND

OPERATIONAL EXPENSES RELATED TO CHILD CARE AWARE

NAME OF ORGANIZATION OR GOVERNMENT:

LIGHTHOUSE CHILD & FAMILY DEVELOPMENT CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: EDUCATIONAL PROGRAMMING-FAMILY

EDUCATION AND COMMUNITY RESOURCE MARKETING MATERIALS

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: ST. PATRICK'S CATHOLIC CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: CHURCH AND SCHOOL'S GENERAL

ACTIVITIES IN MEMORIAL TO PATRICIA AND HER FATHER, JOHN F. PARKER

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number

23-7290968

Part I Questions Regarding Compensation

		Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use										
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence										
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees										
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)										
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b										
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2										
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee					
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract										
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study										
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee										
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:											
a Receive a severance payment or change-of-control payment?	4a		X								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X								
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.											
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.											
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:											
a The organization?	5a		X								
b Any related organization?	5b		X								
If "Yes" to line 5a or 5b, describe in Part III.											
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:											
a The organization?	6a		X								
b Any related organization?	6b		X								
If "Yes" to line 6a or 6b, describe in Part III.											
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X								
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X								
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BRIAN FOGLE PRESIDENT	(i)	122,995.	0.	6,736.	6,736.	17,850.	154,317.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization
COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number
23-7290968

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	1	1,500.	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	69	2,671,750.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2013)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization **COMMUNITY FOUNDATION OF THE OZARKS, INC.** Employer identification number **23-7290968**

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOUTHERN MISSOURI

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: CHAIRMAN OF THE AUDIT OPERATIONS REVIEWS AND PRESENTS IT TO
THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: CONFLICT OF INTEREST FORMS MUST BE COMPLETED BY BOARD MEMBERS
AND STAFF

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: REVIEWED AND DETERMINED BY THE EXECUTIVE COMMITTEE

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ANNUITY ACTUARIAL ADJUSTMENT	-15,743.
RECLASSIFICATION TO AGENCY FUNDS	-11,161,267.
TOTAL TO FORM 990, PART XI, LINE 9	-11,177,010.

PART XI LINE 2C

EXPLANATION: NO CHANGE IN THE PROCESS FROM PRIOR YEARS.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

▶ **Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number

23-7290968

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
COMMUNITY FOUNDATION OF THE OZARKS STOCK TRUST - 71-6225763, 425 E TRAFFICWAY, SPRINGFIELD, MO 65806	THE FOUNDATION RECEIVES AND DISTRIBUTES FUNDS FOR CHARITABLE PURPOSES	MISSOURI	501(C)(3)	11A			X
LEZAH STENGER FOUNDATION - 43-1872019 5051 S NATIONAL AVE SPRINGFIELD, MO 65810	ORGANIZED AS A SUPPORTING ORGANIZATION FOR THE COMMUNITY FOUNDATION	MISSOURI	501(C)(3)	11C			X
OZARKS CHARITABLE REAL ESTATE FOUNDATION LLC - 41-2086647, P.O. BOX 8960, SPRINGFIELD, MO 65807	FOUNDATION RECEIVES, MANAGES AND DISTRIBUTES REAL ESTATE DONATIONS FOR	MISSOURI	501(C)(3)	11A			X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2013

SEE PART VII FOR CONTINUATIONS

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LEZAH STENGER FOUNDATION	C	127,746.FMV	
(2) OZARKS CHARITABLE REAL ESTATE FOUNDATION	C	46,676.FMV	
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

OZARKS CHARITABLE REAL ESTATE FOUNDATION LLC

PRIMARY ACTIVITY: FOUNDATION RECEIVES, MANAGES AND DISTRIBUTES REAL ESTATE DONATIONS FOR CFO